

# Grayson Rural Electric Cooperative Corporation

109 Bagby Park • Grayson, KY 41143-1292  
Telephone 606-474-5136 • 1-800-562-3532 • Fax 606-474-5862

October 3, 2011

Office of General Counsel  
Kentucky Public Service Commission  
211 Sower Boulevard  
Post Office Box 615  
Frankfort, Kentucky 40602

Re: Settlement Agreement  
Case # 2010-00249

Dear Sir or Madam:

Enclosed you will find copies of the crew safety visits and the monthly safety meetings for the months of July, August, and September 2011 as requested per the settlement agreement. If you should need further information please contact me.

Thanks,



Robert Potter  
Manager of Operations

Jv

enclosures

RECEIVED

OCT 3 2011

PUBLIC SERVICE  
COMMISSION

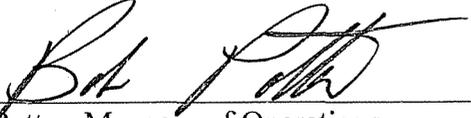
**Monthly Safety Report**  
July 28, 2011

There were no lost time accidents to report this month.

The regular Monday morning safety meetings were held by various staff members of Grayson Rural Electric.

- July 05, 2011—Andrea McCleese, Technical Services Supervisor, was in charge of the meeting. She talked about the new outage system and requested more communication from the servicemen. Carol Ann told about the \$100.00 drawing each month for consumers updating phone numbers and addresses. Bob Potter reminded everyone to be safe.
- July 12, 2011—Brian Poling, Mgr. of Technical Services, was in charge of the meeting. Steve Bush showed a Power Point on residential, camps, barns, small commercial and large power revenue. He talked about how important large power is, showed pictures of some of the large power consumers and the testing machine used to test large power. Bob Potter, Manager of Operations, discussed outages and reminded everyone to be extra safe during storms.
- July 22, 2011—Bob Potter, Manager of Operations, was in charge of the meeting. Robert Brown did a presentation on Heat Exhaustion, what it is, the cause, the treatment, and the prevention. Bob Potter also reminded everyone to be careful and watch about the heat when working.
- July 25, 2011—Priscilla Sparks, Executive Assistant, was in charge of the meeting. Priscilla told about board policy updates on policies 502-Education and 523-Employee Loans. Julie Lewis had the monthly safety give-a-way. Bob Potter talked about the lineman rodeo and reminded everyone to work careful.

Bob continues to mention the necessity and importance of hard hats, rubber gloves and the importance of using ground chains. A line is not dead until it is grounded.

  
\_\_\_\_\_  
Bob Potter, Manager of Operations

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: B. Patton

Date: 7-21-11

Position: Supt

Time: 12:00 PM

Company: GRAYSON RECC

County: Carter Co.

Address: ''

Location: Stark

Phone #: 1-800-562-3532

Crew Members:

Name of Line Crew Observed: Richard Easton

J. Moreland  
 Richard Easton

Weather Conditions: 90° Sunny

Job Description: Changed out A4

Energized Work Being Performed: YES \_\_\_\_\_ NO:  Truck #s 151  
 Overhead  Underground \_\_\_\_\_ Voltage 7200 162 135

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs			<input checked="" type="checkbox"/>	
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>			
Safety gasses	<input checked="" type="checkbox"/>			
Rubber gloves	<input checked="" type="checkbox"/>			
Rubber sleeves	<input checked="" type="checkbox"/>			
FR Clothing	<input checked="" type="checkbox"/>			
Fall Protection	<input checked="" type="checkbox"/>			
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>			
Sleeves			<input checked="" type="checkbox"/>	
Line hoses			<input checked="" type="checkbox"/>	
Blankets			<input checked="" type="checkbox"/>	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or <del>GRECC</del>	<input checked="" type="checkbox"/>			
Decals in Place	<input checked="" type="checkbox"/>			
Proper Clearance	<input checked="" type="checkbox"/>			
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Job Site Findings Discussed with Crew: YES  NO: \_\_\_\_\_

Corrective Actions Needed: Yes \_\_\_\_\_ NO

If Corrective Actions Taken Explain in Detail: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Line Supervisor's Signature: Richard Easter

Inspector's Signature: Bob Pitter

Safety & Loss Coordinator Signature: Bob Pitter

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Pitts

Date: 7-11-11

Position: Supt

Time: 12:00 PM

Company: Grayson RECC

County: Greenup

Address: Andison Ky

Location: Three Prong

Phone #: 1-800-562-3532

Crew Members:

Name of Line Crew Observed: Chris Masier

Chris Masier  
Bob Brown  
Don Martin  
James Watson  
Michael

Weather Conditions: 85° Sunny

Job Description: Changed out A5  
 Pole New Service

Energized Work Being Performed: YES \_\_\_\_\_ NO:  Truck #'s SAME  
 Overhead  Underground \_\_\_\_\_ Voltage 7200

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs			<input checked="" type="checkbox"/>	
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safety gasses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FR Clothing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fall Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Line hoses	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Blankets	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Decals in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Clearance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rolling Grounds In Place	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Public Hazards Present	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Notes/Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Job Site Findings Discussed with Crew: YES  NO: \_\_\_\_\_  
 Corrective Actions Needed: Yes \_\_\_\_\_ NO

If Corrective Actions Taken Explain in Detail: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Line Supervisor's Signature: Chris Meyer  
 Inspector's Signature: Bob Potter  
 Safety & Loss Coordinator Signature: Bob Potter

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Pater  
 Position: Supt  
 Company: Pikely  
 Address: N/A  
 Phone #: SAME

Date: 7-7-11  
 Time: 9:30 AM  
 County: Elliot Co.  
 Location: Dix Branch  
WOA-46557  
 Crew Members:

Name of Line Crew Observed:  
Jonny

W. J. ...  
Martin Rice  
D. Hall  
By Ben

Weather Conditions: 70° Sunny

Job Description: Charged out  
A1 Pole

Energized Work Being Performed: YES  NO:  Truck #'s 38 H451  
 Overhead  Underground  Voltage 7200 7042  
8N108

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs	<input checked="" type="checkbox"/>			
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds			<input checked="" type="checkbox"/>	

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Safety gasses	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Rubber gloves	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Rubber sleeves	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
FR Clothing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Fall Protection	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Sleeves	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Line hoses	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Blankets	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Decals in Place	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Proper Clearance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: \_\_\_\_\_

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Job Site Findings Discussed with Crew: YES  NO: \_\_\_\_\_

Corrective Actions Needed: Yes \_\_\_\_\_ NO

If Corrective Actions Taken Explain in Detail: \_\_\_\_\_

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Line Supervisor's Signature: Tony Sen

Inspector's Signature: Bob Potts

Safety & Loss Coordinator Signature: Bob Potts

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: R. Bol Felt  
 Position: Supt.  
 Company: Pike  
 Address: N/A.

Date: 7-11-11  
 Time: 10:00 AM  
 County: Greenup  
 Location: Caine Cr.

Phone #: same

Crew Members:

Name of Line Crew Observed: Bob Evans

R. Bol Felt

Weather Conditions: 75° Sunny

Steve McNeil  
(Charles) Kelly  
Mark Bunt

Job Description: Pulling in  
 New wire C phase

Energized Work Being Performed: YES   
 Overhead 7200 Underground

NO:  Truck #'s 20 A 48  
83102  
 Voltage 7200 38 H 463

Job Briefing	Yes	No	N/A	If No--Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs	<input checked="" type="checkbox"/>			
Flagman required	<input checked="" type="checkbox"/>			
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>			
Safety gasses	<input checked="" type="checkbox"/>			
Rubber gloves	<input checked="" type="checkbox"/>			
Rubber sleeves	<input checked="" type="checkbox"/>			
FR Clothing	<input checked="" type="checkbox"/>			
Fall Protection	<input checked="" type="checkbox"/>			
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>			
Sleeves	<input checked="" type="checkbox"/>			
Line hoses	<input checked="" type="checkbox"/>			
Blankets	<input checked="" type="checkbox"/>			
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	<input checked="" type="checkbox"/>			
Decals in Place	<input checked="" type="checkbox"/>			
Proper Clearance	<input checked="" type="checkbox"/>			
Rolling Grounds In Place	<input checked="" type="checkbox"/>			
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

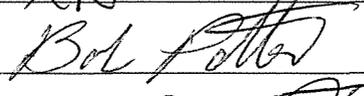
Job Site Findings Discussed with Crew: YES  NO: \_\_\_\_\_

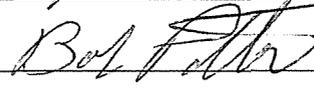
Corrective Actions Needed: Yes \_\_\_\_\_ NO

If Corrective Actions Taken Explain in Detail: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

Line Supervisor's Signature: 

Inspector's Signature: 

Safety & Loss Coordinator Signature: 

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Potts

Date: 7-14-11

Position: Supt

Time: \_\_\_\_\_

Company: Pike  
Address: 7712

County: \_\_\_\_\_

Location: Leon H/S

Phone #: SAME

Crew Members:

Name of Line Crew Observed: Doug Rogers

Luke Flaughor  
 Merlin McHenry  
 Jason Patton  
 Doug Rogers

Weather Conditions: 82° SUNNY

Job Description: Changed Three Phase Pole

Energized Work Being Performed: YES  NO: \_\_\_\_\_  
Overhead  Underground \_\_\_\_\_

Truck #'s SAME  
Voltage 7200

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs			<input checked="" type="checkbox"/>	
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Safety gasses	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Rubber gloves	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Rubber sleeves	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
FR Clothing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Fall Protection	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Sleeves	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Line hoses	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Blankets	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Decals in Place	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Proper Clearance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Job Site Findings Discussed with Crew: YES  NO: \_\_\_\_\_

Corrective Actions Needed: Yes \_\_\_\_\_ NO

If Corrective Actions Taken Explain in Detail: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Line Supervisor's Signature: *Darryl Rasmussen*

Inspector's Signature: *Bob Feltner*

Safety & Loss Coordinator Signature: *Bob Feltner*

**Monthly Safety Report**  
September 01, 2011

There were no lost time accidents to report this month.

The regular Monday morning safety meetings were held by various staff members of Grayson Rural Electric.

- August 04, 2011—Sherry Buckler, General Accounting Supervisor, was in charge of the meeting. Bill Massey with K.A.E.C. attended for the monthly safety meeting. His meeting was on pole top rescue. Attached is a sign in sheet for those who participated in the pole top rescue training. Bob Potter discussed what the safety committee found on three safety investigations which included Julie Lewis, Jonathan Moreland, and Bryan Rogers. Carol Fraley talked about the Lineman Rodeo and everyone viewed pictures taken at the Rodeo.
- August 09, 2011—Kim Bush, Mgr. of Marketing and Member Services, was in charge of the meeting. She talked about collections and showed the number of disconnects and reconnects over the last two years and discussed winter hardship reconnects. Bob Potter, Manager of Operations, reminded everyone to stay safe.
- August 17, 2011—Kyle Clevenger, Assistant Manager of Operations, was in charge of the meeting. Kyle talked about monthly vehicle inspections. He reminded everyone to check all the items that needed to be checked and when the inspections needed to be turned in. Bob Potter reminded everyone to keep the inside of their trucks clean also.
- August 22, 2011—Don Combs, Manager of Finance & Accounting, was in charge of the meeting. His topic was on “How Things Have Changed”. He discussed changes in member services, billing, construction, and engineering. Bob Potter, Manager of Operations, talked about bucket truck testing and hot sticks. He also went over two safety investigations involving Dave Holbrook and Roger Kitchen.
- August 29, 2011—Carol Fraley, Manger & C.E.O., was in charge of the meeting. She read an article from Touchstone Energy about “What is good value to a Member”. She passed out certificates to John Simmons and Joe Sargent for the completion of 8 Hour Hazardous Waste Site Worker Refresher Training and she discussed new board policies. Julie Lewis had the monthly safety give-a-way.

Bob continues to mention the necessity and importance of hard hats, rubber gloves and the importance of using ground chains. A line is not dead until it is grounded.

  
\_\_\_\_\_  
Bob Potter, Manager of Operations

W.O.# 60696862

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bol Feltz  
Position: Supt  
Company: Pike  
Address: N/C  
Phone #: SAME

Date: 8-1-11  
Time: 10:30 AM  
County: Carter  
Location: AK1 Carter  
Crew Members:

Name of Line Crew Observed:  
Greg Rogus  
Weather Conditions: 88°  
SUNNY

Doug Ro  
Mike Flanagan  
Jason Porter  
Merlin Mckenz

Job Description: Putting Arcon's  
IN + FRAMING Poles

Energized Work Being Performed: YES  NO:  Truck #'s SAME  
Overhead  Underground  Voltage 7200

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Job procedure covered	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Energy Control procedure	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PPE used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Job hazards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency procedures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Special precautions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Work Area Protection	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Appropriate Work Signs	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Flagman required	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Flag person used	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Flag person properly equipped	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Traffic cones in place	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Truck chocks used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Personal protective grounds	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Safety gasses	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rubber gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rubber sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
FR Clothing	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Fall Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Line hoses	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Blankets	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Ⓚike or GRECC	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Decals in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Proper Clearance	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Job Site Findings Discussed with Crew: YES  NO: \_\_\_\_\_

Corrective Actions Needed: Yes \_\_\_\_\_ NO

If Corrective Actions Taken Explain in Detail: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Line Supervisor's Signature: *Don [Signature]*

Inspector's Signature: *Bl Fetter*

Safety & Loss Coordinator Signature: *Bl Fetter*

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: B. J. Pitts  
 Position: Supt  
 Company: Pike  
 Address: N/S.  
 Phone #: SAME

Date: 8-1-11  
 Time: 9:30 AM  
 County: Greenup  
 Location: Crain ck

Name of Line Crew Observed:

Crew Members:  
Don  
Shawn McDaniel  
Michael Bynum  
Chris Tackett

Weather Conditions: 88°  
SUNNY

Job Description: RECONDUCT  
~~RELOCATE~~  
wo # 160046574

Energized Work Being Performed: YES  NO:  Truck #'s 85102  
 Overhead  Underground  Voltage 7200 20A48  
38H463

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs	<input checked="" type="checkbox"/>			
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safety gasses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FR Clothing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fall Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Line hoses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Blankets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Decals in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Clearance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rolling Grounds In Place	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Public Hazards Present	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Notes/Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Job Site Findings Discussed with Crew: YES  NO: \_\_\_\_\_

Corrective Actions Needed: Yes \_\_\_\_\_ NO

If Corrective Actions Taken Explain in Detail: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Line Supervisor's Signature:  Bob [Signature]

Inspector's Signature: Bob [Signature]

Safety & Loss Coordinator Signature: Bob [Signature]

WO # 1600-46579

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Potts

Date: 8-16-11

Position: Supt

Time: 2:30 PM

Company: Pike  
Address: 71/4

County: Greenup

Location: Crain Ch

Phone #: same

Crew Members:

Name of Line Crew Observed: Tony Seagraves

Tony Seagraves  
Bob Bair  
Bob Hall

Weather Conditions: 84°  
Sunny

Job Description: Tying in  
New Cond.

Energized Work Being Performed: YES  NO:  Truck #'s same  
Overhead  Underground  Voltage 7200

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs	<input checked="" type="checkbox"/>			
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place	<input checked="" type="checkbox"/>			
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safety gasses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FR Clothing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fall Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Line hoses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Blankets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Decals in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Clearance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rolling Grounds In Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Public Hazards Present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Notes/Comments: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Job Site Findings Discussed with Crew: YES  NO: \_\_\_\_\_

Corrective Actions Needed: Yes \_\_\_\_\_ NO

If Corrective Actions Taken Explain in Detail: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

Line Supervisor's Signature: Tay Nguyen

Inspector's Signature: Bill Pitter

Safety & Loss Coordinator Signature: Bill Pitter Supt

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Pitt

Date: 8-10-11

Position: Supvt

Time: 9:30 AM

Company: GRCC

County: Carter

Address: 109  
Bugby Park Grayson Ky

Location: GRAYSON

Phone #: 1-800-562-3532

Crew Members:

Name of Line Crew Observed: Mark Hutchinson

✓ M. Hutchins  
Robert Brown  
C. Morris  
J. Moreland

Weather Conditions: 80°  
SUNNY

Job Description: Building Two  
Pole TAP

Energized Work Being Performed: YES  NO:  Truck #'s same  
Overhead  Underground  Voltage 7200

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs	<input checked="" type="checkbox"/>			
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safety gasses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FR Clothing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fall Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Line hoses	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Blankets	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Decals in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Clearance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rolling Grounds In Place	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Public Hazards Present	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Notes/Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

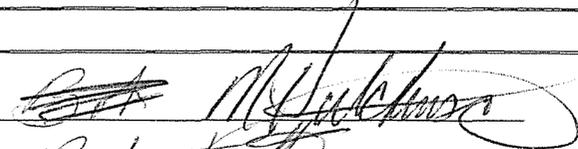
Job Site Findings Discussed with Crew: YES  NO: \_\_\_\_\_

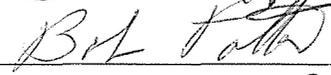
Corrective Actions Needed: Yes \_\_\_\_\_ NO

If Corrective Actions Taken Explain in Detail: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Line Supervisor's Signature: ~~Bob Patten~~ 

Inspector's Signature: 

Safety & Loss Coordinator Signature:  Supt.

WO# 46833

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Fitts

Date: 8-4-11

Position: Supt

Time: 11:30 AM

Company: GRAYSON RECC  
 Address: 169 - BAGBY PARK  
GRAYSON KY

County: GREENUP  
 Location: LOST CREEK

Phone #: 1-800-562-3532

Crew Members:

Name of Line Crew Observed: ~~Bob~~ Richard Easton

Weather Conditions: 87°  
SUNNY

Don Martin  
James Withers  
Richard Easton  
Bob Ross

Job Description: Charged out  
AS Pole

Energized Work Being Performed: YES  NO:  Truck #'s SAME  
 Overhead  Underground  Voltage 7200

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Job procedure covered	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Energy Control procedure	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PPE used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Job hazards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency procedures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Special precautions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Work Area Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Appropriate Work Signs	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Flagman required	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Flag person used	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Flag person properly equipped	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Traffic cones in place	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Truck chocks used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Personal protective grounds	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Safety gasses	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rubber gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rubber sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
FR Clothing	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Fall Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Line hoses			<input checked="" type="checkbox"/>	
Blankets			<input checked="" type="checkbox"/>	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike of GRECC	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Decals in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Proper Clearance	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Job Site Findings Discussed with Crew: YES  NO: \_\_\_\_\_

Corrective Actions Needed: Yes \_\_\_\_\_ NO

If Corrective Actions Taken Explain in Detail: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Line Supervisor's Signature: *Richard Easton*

Inspector's Signature: *Bob Potter*

Safety & Loss Coordinator Signature: *Bob Potter*

**Monthly Safety Report**  
September 26, 2011

There were no lost time accidents to report this month.

The regular Monday morning safety meetings were held by various staff members of Grayson Rural Electric.

- September 07, 2011—Andrea McCleese, Technical Services Supervisor, was in charge of the meeting. David White from K.A.E.C. attended for the monthly safety meeting. He reviewed an accident involving Pennyrile Electric. He also had an APPA Safety Manual review/refresher. Carol Fraley talked about flame retardant clothing. Bob Potter discussed an accident report involving Mike Martin.
- September 12, 2011—Bob Potter ask John Simmons to lead everyone in the Pledge of Allegiance. Brian Poling, Mgr. of Technical Services, was in charge of the meeting. His topic was “Keeping Your Identity Safe.” He talked about how to protect your social security number and what kind of computer passwords were safe to use.
- September 19, 2011—Bob Potter, Manager of Operations, was in charge of the meeting. Robert Brown presented a power point on “Ladder Safety”. Robert talked about weights for ladders, climbing and position of ladders. Carol Fraley, Manager & C.E.O., talked about the upcoming board meeting. She also discussed a new code word to be used if 911 needed to be called.
- September 26, 2011—Priscilla Sparks, Executive Assistant, was in charge of the meeting. Kim Bush had a program about the “Simple Saver Program”. The program is to help reduce electricity use during peak demand periods. Carol Fraley gave information about a \$25.00 incentive for those who sign up for the simple saver program. Bob Potter talked about copper theft on G.R.E.C.C. lines. Julie Lewis had the monthly safety give-a-way.

Bob continues to mention the necessity and importance of hard hats, rubber gloves and the importance of using ground chains. A line is not dead until it is grounded.



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Bob Potter, Manager of Operations

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Potter  
 Position: Supt  
 Company: GRAYSON REC  
 Address: GRAYSON Ky

Date: 9-13-11  
 Time: 1:00 pm  
 County: Greenup  
 Location: RT 2 Greenup

Phone #: 1-800-569-3535 Crew Members:

Name of Line Crew Observed:  
Scott Sparks

Scott Sparks  
James W. Sparks  
Bob Potter  
Reggie Kitch

Weather Conditions: 75° Sunny

Job Description: Hook up for TSS - 77 Metas in low gap sub

Energized Work Being Performed: YES  NO:  Truck #'s Same  
 Overhead  Underground  Voltage 7200

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs			<input checked="" type="checkbox"/>	
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>			
Safety gasses	<input checked="" type="checkbox"/>			
Rubber gloves	<input checked="" type="checkbox"/>			
Rubber sleeves			<input checked="" type="checkbox"/>	
FR Clothing	<input checked="" type="checkbox"/>			
Fall Protection			<input checked="" type="checkbox"/>	
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>			
Sleeves			<input checked="" type="checkbox"/>	
Line hoses			<input checked="" type="checkbox"/>	
Blankets			<input checked="" type="checkbox"/>	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	<input checked="" type="checkbox"/>			
Decals in Place	<input checked="" type="checkbox"/>			
Proper Clearance	<input checked="" type="checkbox"/>			
Rolling Grounds In Place			<input checked="" type="checkbox"/>	
Public Hazards Present			<input checked="" type="checkbox"/>	

Notes/Comments: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Job Site Findings Discussed with Crew: YES  NO: \_\_\_\_\_

Corrective Actions Needed: Yes \_\_\_\_\_ NO

If Corrective Actions Taken Explain in Detail: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

Line Supervisor's Signature:  *J. Scott Speck*

Inspector's Signature: *Bob Porter*

Safety & Loss Coordinator Signature: *Bob Porter Supt.*

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bd Potts Date: 9-8-11  
 Position: Supt Time: 11:00 AM  
 Company: GRAYSON RECC County: CARTER CO  
 Address: 109 BABBY PARK Location: Big Sinking  
GRAYSON KY 41143  
 Phone #: 1-800-562-3532 Crew Members:

Name of Line Crew Observed: Richard Euston  
Richard Euston  
 Weather Conditions: SUNNY 75°  
James Withers  
Scott Speaks

Job Description: changed out  
A-1

Energized Work Being Performed: YES  NO:  Truck #'s SAME  
 Overhead  Underground  Voltage 7200

Job Briefing	Yes	No	N/A	If No--Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs			<input checked="" type="checkbox"/>	
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safety gasses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber sleeves	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
FR Clothing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fall Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sleeves	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Line hoses	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Blankets	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or <u>GRECC</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Decals in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Clearance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rolling Grounds In Place	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Public Hazards Present	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Notes/Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Job Site Findings Discussed with Crew: YES  NO: \_\_\_\_\_

Corrective Actions Needed: Yes \_\_\_\_\_ NO

If Corrective Actions Taken Explain in Detail: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Line Supervisor's Signature: Richard Easton

Inspector's Signature: Bob Patten

Safety & Loss Coordinator Signature: Bob Patten

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Poth  
 Position: Supt  
 Company: P, K, e  
 Address: N/C

Date: 9-6-11  
 Time: 11:30 AM  
 County: Carter Co.  
 Location: CARTEN CITY

Phone #: SAME

Crew Members:

Name of Line Crew Observed: Jonny Seagraves

✓ Tony [Signature]  
[Signature]  
[Signature]

Weather Conditions: RAIN

Job Description: Relocat line  
3 Phase Add 7 Poles

Energized Work Being Performed: YES  NO:  Truck #'s SAME  
 Overhead  Underground  Voltage 7200

Job Briefing	Yes	No	N/A	If No—Corrective Action Taken
Conducted Before job & signed	✓			
Job procedure covered	✓			
Energy Control procedure	✓			
PPE used	✓			
Job hazards	✓			
Emergency procedures	✓			
Special precautions	✓			
Work Area Protection	✓			
Appropriate Work Signs			✓	
Flagman required			✓	
Flag person used			✓	
Flag person properly equipped			✓	
Traffic cones in place			✓	
Trucks grounded			✓	
Truck chocks used	✓			
Personal protective grounds			✓	

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safety gasses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber sleeves	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
FR Clothing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fall Protection	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sleeves	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Line hoses	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Blankets	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
Pike or GRECC	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Decals in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Clearance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Rolling Grounds In Place	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Public Hazards Present	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Notes/Comments: Framing 3 Phase Poles

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Job Site Findings Discussed with Crew: YES  NO:

Corrective Actions Needed: Yes  NO

If Corrective Actions Taken Explain in Detail: \_\_\_\_\_

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Line Supervisor's Signature: Taylor

Inspector's Signature: Bob Fath

Safety & Loss Coordinator Signature: Bob Fath

GRAYSON RURAL ELECTRIC COOPERATIVE CORPORATION

LINE CREW FIELD INSPECTION FORM

Inspector: Bob Potts  
 Position: Supt  
 Company: Pike  
 Address: N/A

Date: 9-30-11  
 Time: 11:00 AM  
 County: CARTER CO.  
 Location: Aden Rd.

Phone #: SAME

Crew Members:

Name of Line Crew Observed:  
Doug Rogers

Doug Rogers  
Martin Jones  
James Patten  
Merlin McHenry

Weather Conditions: Cloudy 70°

Job Description: WO.# 46892

Energized Work Being Performed: YES  NO:  Truck #'s SAME  
 Overhead  Underground  Voltage 7200

Job Briefing	Yes	No	N/A	If No--Corrective Action Taken
Conducted Before job & signed	<input checked="" type="checkbox"/>			
Job procedure covered	<input checked="" type="checkbox"/>			
Energy Control procedure	<input checked="" type="checkbox"/>			
PPE used	<input checked="" type="checkbox"/>			
Job hazards	<input checked="" type="checkbox"/>			
Emergency procedures	<input checked="" type="checkbox"/>			
Special precautions	<input checked="" type="checkbox"/>			
Work Area Protection	<input checked="" type="checkbox"/>			
Appropriate Work Signs	<input checked="" type="checkbox"/>			
Flagman required			<input checked="" type="checkbox"/>	
Flag person used			<input checked="" type="checkbox"/>	
Flag person properly equipped			<input checked="" type="checkbox"/>	
Traffic cones in place			<input checked="" type="checkbox"/>	
Trucks grounded	<input checked="" type="checkbox"/>			
Truck chocks used	<input checked="" type="checkbox"/>			
Personal protective grounds	<input checked="" type="checkbox"/>			

PPE Being Used	Yes	No	N/A	If No—Corrective Action Taken
Hard hat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safety gasses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FR Clothing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fall Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rubber Goods Inspections	Yes	No	N/A	If No—Corrective Action Taken
Gloves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sleeves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Line hoses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Blankets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Miscellaneous Observations	Yes	NO	N/A	If No—Corrective Action Taken
⓪ Pike or GRECC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Decals in Place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Clearance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rolling Grounds In Place	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Public Hazards Present	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Notes/Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Job Site Findings Discussed with Crew: YES  NO: \_\_\_\_\_

Corrective Actions Needed: Yes \_\_\_\_\_ NO

If Corrective Actions Taken Explain in Detail: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Line Supervisor's Signature: *Doug [Signature]*

Inspector's Signature: *Bob [Signature]*

Safety & Loss Coordinator Signature: *Bob [Signature]*